1 2 3 4 5 6 7 8	Assistant Deputy Director, Bar No. 155111 DEBRA L. DENTON Assistant Chief Counsel, Bar No. 164482 MICHAEL D. MCCLELLAND, Staff Counsel, Bar No. 204223 CALIFORNIA DEPARTMENT OF MANAGED HEALTH CARE 980 Ninth Street, Suite 500 Sacramento, CA 95814-7243 Telephone: (916) 323-0435	MAY 17, 2007 DEPARTMENT OF MANAGED HEALTH CARE By Filing Clerk
9	Attorneys for Complainant	
10	BEFORE THE DEPARTMENT OF MANAGED HEALTH CARE	
11	OF THE STATE OF CALIFORNIA	
12	IN THE MATTER OF:	Enforcement Matter No.: 07-227
13	PacifiCare of California, Inc.,	CEASE AND DESIST ORDER RE
14		SEQUOIA DIRECTLY CONTRACTED NETWORK
15	Respondent.	
16	}	(Health and Safety Code §§1341, 1344, 1341.8, 1360, 1386(b)(7), 1391)
17 18 19 20 21	To: PacifiCare of California 5995 Plaza Drive, MS CA 112-0267 Cypress, CA 90630-5028 The Director of the Department of Mar	naged Health Care, by and through her
22	designee, Assistant Deputy Director Amy L. Dobberteen, after investigation,	
23	determines as follows:	
24		
25	I. PARTIES	
26 27 28	 The Director of the Department of Managed Health Care is vested with the responsibility to administer and enforce the Knox-Keene Health Care Service Plan Act of 1975, Health and Safety Code, section 1340 et seq. 	

Cease and Desist Order Matter ID: 07-227 Doc No.: 23229

 PacifiCare of California is a health care service plan licensed under the Knox-Keene Act, license number 933 0126, and is regulated by the Department of Managed Health Care.

II. STATUTORY AUTHORITY

- 3. The Knox-Keene Act prohibits deceptive solicitations by health care service plans. No plan shall use or permit the use of any advertising or solicitation which is untrue or misleading, or any form of evidence of coverage which is deceptive. (Health & Saf. Code §1360.)
- 4. The Director is empowered to take disciplinary action against a plan which engages in conduct constituting fraud or dishonest dealing or unfair competition, as defined by section 17200 of the Business and Professions Code. (Health & Saf. Code §1386(b)(7).)
- 5. The Director is empowered to enforce compliance with the Knox-Keene Act. (Health & Saf. Code §1391.)

III. FACTUAL BACKGROUND

- 6. In or about December 2005, PacifiCare removed Sequoia Directly Contracted Network ("Sequoia") providers from its provider directory. Notwithstanding the decision to remove Sequoia from its directory, PacifiCare continued to permit enrollees to see Sequoia Network providers.
- 7. In or about June 2005, PacifiCare notified the Sequoia Directly Contracted Network of its decision to terminate its contract with Sequoia effective December 31, 2005. In or about December 2005, PacifiCare closed its panel removing Sequoia providers from its provider directory. Notwithstanding its decision to terminate the contract and to remove Sequoia from its provider panel, PacifiCare continued to treat Sequoia as a contracted provider,

authorizing enrollees to visit Sequoia providers, but failing to inform enrollees that Sequoia providers were no longer intended to be panel or contracted providers.

- 8. In or about October-November 2006, various individuals enrolled and reenrolled in PacifiCare's commercial HMO plan, selecting physicians within the Sequoia network as their health care providers. At the time of their enrollment, these enrollees and re-enrollees were not informed that Sequoia was no longer a PacifiCare HMO-network provider, despite PacifiCare's decision to terminate the Network in June 2005. PacifiCare provided no notice to its enrollees of its planned termination of the Sequoia contract. Consequently, at the time of enrollment/re-enrollment in October-November 2006, PacifiCare withheld information which a reasonable enrollee or re-enrollee would expect to affect his or her decision regarding benefits, service charges, or other advantages.
- 9. In or about February 2007, PacifiCare notified Sequoia that it would terminate its contract effective April 30, 2007.
- 10. The Department has received complaints from PacifiCare enrollees stating that PacifiCare provided no notice to them of its decision to terminate the Sequoia Network prior to the enrollment/re-enrollment period.
- 11. The Department has received at least one complaint from a Sequoia provider concerning PacifiCare's termination of the Sequoia Network contract and its impact on PacifiCare enrollees who had chosen Sequoia providers.

IV. FINDINGS

12. The Director finds that PacifiCare enrollees who believed Sequoia providers were contracted providers during the enrollment period were deprived of the benefit of their bargain, deceived, or otherwise misled, and that PacifiCare's failure to provide notice of its planned termination of Sequoia to the enrollees

constituted fraud or dishonest dealing or unfair competition because a reasonable enrollee would have found the Sequoia Network termination relevant to the enrollee's choice and expected benefits from coverage. (Health and Safety Code sections 1360, 1386(b)(7), Business and Professions Code section 17200.)

13. The Director finds that PacifiCare enrollees who believed Sequoia providers were contracted providers during the enrollment period were misled and deceived by PacifiCare's actions within the meaning of Health and Safety Code section 1360.

ORDER

THEREFORE, the Director of the Department of Managed Health Care, by and through her designee, Assistant Deputy Director Amy L. Dobberteen, pursuant to Health and Safety Code section 1391, ORDERS AS FOLLOWS:

- 1. PacifiCare shall cease and desist from misleading its enrollees, from withholding material information from enrollees;
- 2. PacifiCare shall continue to authorize services and allow access to the Sequoia Directly Contracted Network to those PacifiCare enrollees whose coverage originated or renewed during the October-November 2006, open enrollment or later, until at least one calendar year from the date of initial coverage or renewal of said enrollees;
- 3. The terms of the just-expired PacifiCare-Sequoia Network contract, including, but not limited to, fees for service between PacifiCare and Sequoia, shall continue in full force for one calendar year from the date of initial coverage or renewal of coverage of those enrollees identified in the immediately preceding Paragraph 1, except to the extent any such term is inconsistent with this Order;

4.) PacifiCare shall notify all affected enrollees of the availability of Sequoia providers as contracted providers within two weeks from the date of this Order.

Dated: May 17, 2007

DEPARTMENT OF MANAGED HEALTH CARE

By:

AMY L. DOBBERTEEN Assistant Deputy Director Office of Enforcement